

Title | FOOD TABOOS AND PREFERENCES AMONG WOMEN OF REPRODUCTIVE AGE IN MAINLAND TANZANIA: A QUALITATIVE STUDY

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BACKGROUND AND OBJECTIVES

Maternal malnutrition is persistent in Tanzania. About 45 percent of women aged 15 to 49 years suffer from anemia, and 57 percent of pregnant women are affected. One in three women suffer from multiple micronutrient deficiencies. Maternal micronutrient deficiencies, especially iron deficiency anemia, are among the main causes of maternal mortality and generally poor birth outcomes. This trend makes Tanzania lag behind in meeting the United Nations Sustainable Development Goal 3 target of <70 deaths per 100,000 live births by 2030. Better understanding women's food preferences can help practitioners design interventions to promote nutritious, acceptable dietary practices. The primary objective of the study is to identify food preferences for women of reproductive age, adolescent girls, and children in Tanzania.

METHODS

We conducted this cross-sectional descriptive qualitative study in urban and rural districts in each of the main zones of mainland Tanzania. The study team collected primary data through key informant interviews and focus group discussions to get insight into food taboos and preferences and highlight available opportunities and gaps for maternal nutrition. The study team recruited women of reproductive age (15–49 years)—specifically pregnant women, mothers/caregivers of children aged 6–24 months, and adolescent girls. We also included influencers such as health workers and community leaders because other community and macro level factors may influence their food preferences. We conducted at least three focus group discussions and six key informant interviews in each region, resulting in a total of 21 focus groups and 42 interviews.

RESULTS

- Preliminary findings show a number of prohibitions and preferences on the foods women of reproductive age can consume. Variations exist across age, socioeconomic condition, geographic locale, religious and ethnic affiliations, and exposure to globalization.
- Pork is highly prohibited for Muslims and some Christians. Some ethnic groups prohibit farming of certain types of some legumes (njugu mawe) because they believe the legumes prevent rainfall.

Figure 1. Taboo Food



- For pregnant women, beliefs prohibit the consumption of foodstuffs due to concerns for difficulties during pregnancy and childbirth.
- Among adolescent girls, exposure to modern lifestyles and globalization shape food preferences. They prefer protein-rich foods such as red meat, chicken, or eggs due to the taste and symbolic significance among their peers. Fruits; vegetables; fish; red meat; or rice with beans, fish, or red meat were most often preferred depending on geographic location and ethnic affiliation/socialization, as well as availability, which often varies with the season (rain vs. dry).
- Among pregnant women, preferences were mainly shaped by health condition, personal taste, and socioeconomic conditions influencing the accessibility of certain foods, such as red meat, chicken, or eggs; chips; fruits; vegetables; fish; or rice with beans, fish, or red meat.

KEY TAKE-AWAY

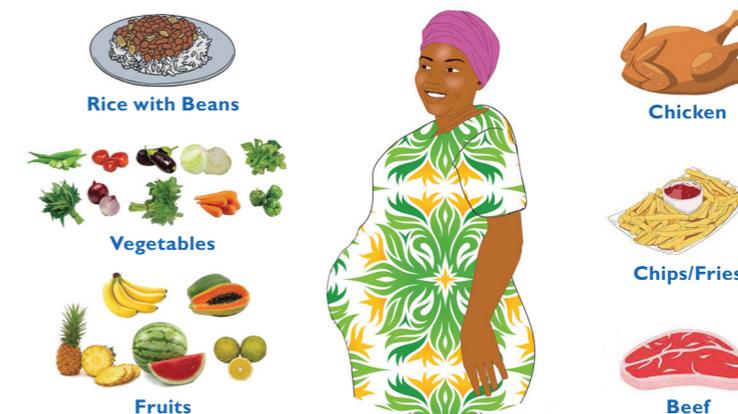
The study findings can inform maternal nutrition counseling to address food taboos and preferences that influence dietary choices and intake.

CONCLUSION AND RECOMMENDATIONS

A number of existing activities and structures have the potential for promoting appropriate nutrition for women of reproductive age in communities. Among these is the provision of nutrition information and education through reproductive and child health, which may cover appropriate nutrition during pregnancy and breastfeeding.

Community health workers can offer information and education to counter taboos and preferences that may be harmful for women of reproductive age. Nutrition, livestock, agricultural extension departments, and civil society organizations should work together to promote and advocate for food production systems that increase the availability of diverse, local foodstuffs in different seasons.

Figure 2. Preferred Food



The authors declare no conflict of interest.



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